

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Angie for Congress WA-03

ADDRESS (number and street)

8002 NE Highway 99

PMB #636

Vancouver

WA

98665

☐ Check if different
than previously
reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

C C00581017

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

WA

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2015

through

M M / D D / Y Y Y Y
09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mrs. Sarah P Wilmot-Johnson

Signature of Treasurer

Mrs. Sarah P Wilmot-Johnson

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Angie for Congress WA-03

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	766.16	766.16
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	766.16	766.16
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	-2101.04	-2101.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	-2101.04	-2101.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4182.72	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Angie for Congress WA-03

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized.....

766.16

766.16

(iii) TOTAL of contributions from individuals ▶

766.16

766.16

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

766.16

766.16

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

766.16

766.16

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	-2101.04	-2101.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	-2101.04	-2101.04

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1315.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	766.16
25. SUBTOTAL (add Line 23 and Line 24).....	2081.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	-2101.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4182.72

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 7

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Angie for Congress WA-03

Full Name (Last, First, Middle Initial)

A. Angie for Congress WA-03Mailing Address 8002 NE Highway 99
PMB #636

City Vancouver State WA Zip Code 98665

Purpose of Disbursement
From July 7 to Aug 10, 2015 misc travel & food expenses

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: WA District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

-450.00

Transaction ID : SB17.4169

B. Angie for Congress WA-03Mailing Address 8002 NE Highway 99
PMB #636

City Vancouver State WA Zip Code 98665

Purpose of Disbursement
Misc office petty cash expenditures

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: WA District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Disbursement this Period

-88.37

Transaction ID : SB17.4162

c. Angie for Congress WA-03Mailing Address 8002 NE Highway 99
PMB #636

City Vancouver State WA Zip Code 98665

Purpose of Disbursement
Misc office petty cash expenditures

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: WA District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Disbursement this Period

-70.37

Transaction ID : SB17.4165

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

-608.74

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 7

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Angie for Congress WA-03

Full Name (Last, First, Middle Initial)

A. Angie for Congress WA-03Mailing Address 8002 NE Highway 99
PMB #636

City Vancouver State WA Zip Code 98665

Purpose of Disbursement
Misc office petty cash expenditures

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: WA District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Disbursement this Period

-23.55

Transaction ID : SB17.4167

B. Angie for Congress WA-03Mailing Address 8002 NE Highway 99
PMB #636

City Vancouver State WA Zip Code 98665

Purpose of Disbursement
travel & misc expenses Aug 11 to Sept 29, 2015

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: WA District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2015

Amount of Each Disbursement this Period

-500.00

Transaction ID : SB17.4179

c. Angie for Congress WA-03Mailing Address 8002 NE Highway 99
PMB #636

City Vancouver State WA Zip Code 98665

Purpose of Disbursement
Misc office petty cash expenditures

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: WA District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2015

Amount of Each Disbursement this Period

-28.75

Transaction ID : SB17.4178

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

-552.30

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Angie for Congress WA-03

Full Name (Last, First, Middle Initial)

A. Brainwrap Website Design

Mailing Address 3711 Thornbrier Way

City	State	Zip Code
Bloomfield Hills	MI	48302

Purpose of Disbursement
18 month web hosting fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 08 / 2015

Amount of Each Disbursement this Period

-540.00

Transaction ID : SB17.4154

B. Brainwrap Website Design

Mailing Address 3711 Thornbrier Way

City	State	Zip Code
Bloomfield Hills	MI	48302

Purpose of Disbursement
Monthly payment on balance due

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 15 / 2015

Amount of Each Disbursement this Period

-200.00

Transaction ID : SB17.4157

C. Brainwrap Website Design

Mailing Address 3711 Thornbrier Way

City	State	Zip Code
Bloomfield Hills	MI	48302

Purpose of Disbursement
Monthly payment on balance due

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 05 / 2015

Amount of Each Disbursement this Period

-200.00

Transaction ID : SB17.4158

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

-940.00

-2101.04